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Rural Health Newscast

Rural Health Policy Council Office Health & Welfare Agency State of California

January 9, 1998

Federal Grants

Rural Network Development Grants

Purpose: The purpose of this program is to support the planning and development of vertically integrated health care networks in rural areas. There must be a memorandum of agreement or other formal arrangement between members of a network. The emphasis of the program is on projects to develop the organizational capabilities of these networks. The network is a tool for overcoming the fragmentation of health care delivery services in rural areas.

Estimated Amount of Competition: Estimated Number of Awards: 10-15 Deadline: March 16, 1998 Projected Award Date: September 30, 1998

To Order Application Kit: Jake Culp, (888) 333-4772 CFDA Number: Network 93.912B

Rural Health Outreach Grants

Purpose: Rural Health Outreach Grants are designed to expand or enhance the availability of essential health services in rural areas and develop health service delivery networks. The purpose of this program is to support projects that demonstrate creative models of outreach and health care services delivery in rural areas that lack basic health services. Grants will be awarded either for the direct provision of health services to rural populations, especially for those not currently receiving them, or to enhance access to and utilization of existing available services.

Estimated Amount of Competition: \$2.5M Estimated Number of Awards: 10-12 March 16, 1998 Deadline: Projected Award Date: September 30, 1998 To Order Application Kit:

Arlene Granderson, (888) 333-4772 CFDA Number: Network 93.912A

Note: Eligibility and Funding Priorities are the same for both grant programs.

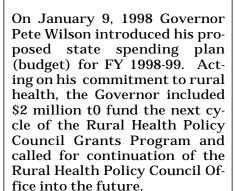
Eligibility: A rural public or nonprofit private entity that is or represents a network which includes three or more health care providers or other entities that provide or support the delivery of health care services. The administrative headquarters of the organization must be located in a rural county or in a rural census tract of an urban county, or an

organization constituted exclusively to provide services to migrant and seasonal farmworkers in rural areas and supported under Section 330G of the Public Health Service Act. These organizations are eligible regardless of the urban or rural location of the administrative headquarters.

Funding Priorities and Preferences: Funding preference may be given to applicant networks that include: (1) a majority of the health care providers serving in the area or region to be served by the network; (2) any federally qualified health centers, rural health clinics, and local public health departments serving in the area or region; (3) outpatient mental health providers serving in the area or region; or (4) appropriate social service providers, such as aging, school systems, and providers under the women, infants, and children program (WIC) to improve access to and coordination of health care ser-



Governor's **Proposed Budget** FY 98-99





Total Counties

Positions filled: 243 patient care 130 administrative 82 31 ancillary Current listings: 55 patient care 26 administrative 21 8 ancillary **Total Locations** 137

54

Rural Health Policy Council Rural Hospital Services Grant Awards for 1997-1998

Congratulations to the 46 hospitals who applied for the grants, up from 30 applicants last year. \$3,000 Avalon Municipal Hospital Barton Memorial Hospital 25,000 Bear Valley Community Healthcare 3,000 Biggs-Gridley Memorial Hospital 25.000 Colusa Community Hospital 13,950 Corcoran District Hospital 7,698 Dos Palos Memorial Hospital 3.000 Eastern Plumas District Hospital 7,748 Frank R. Howard Memorial Hospital 25,000 Glenn Medical Center 3,000 Hazel Hawkins Memorial Hospital 14,860 Indian Valley Hospital 3.000 John C. Fremont Healthcare District 7,371 Lassen Community Hospital 10,362 Lindsay District Hospital 11,336 Lompoc District Hospital 6,077 Mammoth Hospital 7,305 Mark Twain St. Joseph's Hospital 21,544 Marshall Hospital 25,000 Memorial Hospital at Exeter 3,000 Mendocino Coast District Hospital 25,000 Mercy Medical Center Mt. Shasta 12.046 Modoc Medical Center 3,000 **Needles Desert Communities Hospital** 12,776 Oak Valley Hospital 5,186 Ojai Valley Community Hospital 3,000 Palo Verde Hospital 7,323 Plumas District Hospital 7.672 Redbud Community Hospital 21.219 Ridgecrest Regional Hospital 5.434 San Gorgonio Memorial Hospital 3,243 Santa Ynez Valley Cottage Hospital 3,000 Seneca Hospital District 6,309 3,000 Sierra Kings District Hospital Sierra Valley District Hospital 3,000 Siskiyou General Hospital 15,850 Sonora Community Hospital 11,205 St. Elizabeth Community Hospital 25,000 Surprise Valley Community Hospital 3,000 Sutter Coast Hospital 21,895 Sutter Lakeside Hospital 25,000 Tahoe Forest Hospital District 14.136 Trinity Hospital 12.445 Tuolumne General Hospital 25,000 Ukiah Valley Medical Center 25,000 3,000 Westside District Hospital \$528,990 Total

Rural Health Newscast

W.K. Kellogg Foundation Launches New Rural Information Initiative

The Foundation recently launched a \$16.5 million initiative called Managing Information with Rural America (MIRA). This five-year effort is designed to assist rural communities in determining how technology can be used to address the growing concerns of rural populations on such matters as economic development, education, health, and leadership. Each year, over the life-span of the initiative, five groups of community teams, ten to fifteen community-support organizations and three policy-support organizations will receive grants to make better use of communications electronic and information systems.

Although the deadline for the 1997 proposals has passed, this initiative will be a yearly effort.

There are three distinct levels of grant support in this initiative. On the local level. the Foundation will award five grants of up to \$200,000 each to fund clusters of community teams within a local community. Building on those efforts, two to four community-support organizations within each cluster of community teams will receive up to \$250,000 for the use of technology to enhance their current community services and further improve their community's economy.

On the national level, in MIRA's first year, up to four national policy groups will receive grants between \$150,000 to \$250,000 to work with selected clusters of

community teams around local, regional, and national issues they determine relevant.

For additional information, or to obtain a copy of the Request for Proposal for 1998, contact 888/264-6662 or visit the Kellogg Foundation's website at www.wkkf.org/basesystem/sec/WKKF/filecomponent/1130 MIRA.htm

Rural Health Policy Council Upcoming Public Meetings

March 20 Sacramento
Following the California State Rural
Health Association meeting on 3/19 and
immediately preceding the California
Healthcare Association/Rural Healthcare Center's Annual Rural Healthcare
Symposium.

May Redding Date, time and location TBA

September 11 Fresno Time and Location TBA Those of you who completed the Constituent Satisfaction Survey in August,1997 and requested a site visit from the RHPC Liaison were sent a site visit inquiry letter. If you still wish to have the Liaison, Fred Johnson, visit your site, please mail or fax the inquiry letter as soon as possible.

The RHPC Office has already begun scheduling the first of over 50 statewide site visits. Mr. Johnson hopes to complete all the visits by July 1, 1998.





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